Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE C			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			31					R	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		RA	BAS	SIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			3) minus 20=		* 1)		X	\$ 9=		OR	X\$18=	198		
INDEPENDENT CLAIMS			/ 6 minus 3 = *			3		×	(42=		OR	X84=	1092	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					140=		OR	+280=			
* If the difference in column 1 is less th				an zero, enter "0" in column 2			2	T	OTAL		OR	TOTAL	2030	
	C		MENDE	DED - PART II (Column 2) (Column 3)				SI	SMALL ENTITY			OTHER THAN		
		(Column 1)		HIGH		T	Juli III 3)		ADDI-			ADDI-		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRES		R	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X	(42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	*280 <u>=</u>		
									TOTAL			TOTAL		
								ADD	IT. FEE	L	OR	ADDIT. FEE		
		(Column 1)			mn 2)	(Colu	mn 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRES		R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	=		(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		\ \ \ \	(42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=		
								L	TOTAL		OR	TOTAL		
									IT. FEE		Jon	ADDIT. FEE		
_		(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	MBER NOUSLY D FOR		SENT FRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		×	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		1	(42=			X84=	<del>                                     </del>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J 1	H			OR	<del></del>	<del></del>	
+140=											OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT. FEE		
l **	*If the "Highest Nu	in the an	nronriate ho	v in co	olumn 1									